

Indiana State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>005075</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING: _____	(X3) DATE SURVEY COMPLETED  <b>02/06/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>ST VINCENT HOSPITAL &amp; HEALTH SERVICES</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2001 W 86TH ST INDIANAPOLIS, IN 46260</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	<p>INITIAL COMMENTS</p> <p>This visit was for two (2) licensure complaint investigations.</p> <p>Dates of survey: 02/06/14</p> <p>Facility number: 005075</p> <p>Complaint numbers: IN00136110, Unsubstantiated; No deficiencies cited IN00132497, Substantiated; Deficiencies cited.</p> <p>Surveyor: Jennifer Hembree, RN Public Health Nurse Surveyor</p> <p>QA: cloughlin 03/05/14</p>	S 000		
S 712	<p>410 IAC 15-1.5-4 MEDICAL RECORD SERVICES</p> <p>410 IAC 15-1.5-4 (c)(1)</p> <p>(c) An adequate medical record shall be maintained with documentation of service rendered for each individual who is evaluated or treated as follows:</p> <p>(1) Medical records are documented accurately and in a timely manner, are readily accessible, and permit prompt retrieval of information.</p> <p>This RULE is not met as evidenced by: Based on document review, the facility failed to ensure the emergency department (ED) records were accurate as to current medications and</p>	S 712		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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S 712	<p>Continued From page 1</p> <p>discharge instruction sheets were accurate as to new prescriptions for 1 of 5 patient records.</p> <p>Findings include:</p> <p>1. Review of patient #3 medical record indicated the following:</p> <p>(A) He/she presented to the ED for treatment on 7/11/13.</p> <p>(B) A problem was identified with accuracy of the patients active medications. Page 3 of the ED triage note was titled "Rx Writer" and had medications listed on 7/11/13 that were listed as "active" which would not be correct. The document indicated that Medrol Dosepak was "active" and according to another section of the medical record the medication had been ordered on 5/23/13 and was only for five (5) days. In addition, Acetaminophen-OxyCODONE 325-5 mg tablet was listed as active, however review of the record indicated that the patient had been prescribed that medication on 2/17/12 with only sixteen (16) tablets given at that time which was a year and a half prior to this visit.</p> <p>(C) The form titled "PATIENT DISCHARGE DISPOSITION FORM" (a three (3) page document containing a patient signature on page 3) was not accurate. The document had listed under "NEW PRESCRIPTIONS" Prednisone and Acetaminophen-oxyCODONE, which were prescribed on 2/17/12, Fluticasone nasal spray, Medrol dosepak, and Lortab elixer which had been prescribed on 5/23/13, and Acetaminophen-Hydrocodone 500 mg which had been prescribed on 11/12/12. The patient was prescribed Chloraseptic spray and Pepcid at the current visit (7/11/13) which were also listed with the other "new prescription" medications. The format of the form was confusing as to what were the current medication orders from the physician.</p>	S 712			

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S1504	<p>410 IAC 15-1.6-2 EMERGENCY SERVICES</p> <p>410 IAC 15-1.6-2(a)</p> <p>(a) If a hospital provides a community emergency service, the service shall meet the emergency needs of the patients served, within the scope of the service offered, in accordance with acceptable standards of practice, and be under the direction of a physician qualified by education or experience.</p> <p>This RULE is not met as evidenced by: Based on document review and staff interview, the facility failed to meet the needs of the patients presenting to the emergency department (ED) for 1 of 5 patients.</p> <p>Findings include:</p> <p>1. Review of patient #3 medical record indicated the following: (A) Per the patient's facesheet, he/she registered at 2125 on 7/11/13 with "admitting diagnosis" listed as sore throat, bilateral heel pain and leg pain. (B) The patient was triaged at 2126 and triage chief complaint was listed as sore throat and bilateral heel pain. The pain rating given by the patient at triage was a 9 with a pain scale of 1-10 used with 10 being the worse pain. (C) Nurse notes at 2154 indicate the patient complained of bilateral heel pain and that it hurt "like standing on my bones" when standing upright or walking. (D) The patient was examined by M.D. #1. The physician documentation including a narrative entry lacked evidence that the patients heel pain</p>	S1504		

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S1504	<p>Continued From page 3</p> <p>was addressed which was one of the chief complaints.</p> <p>(E) The patient did not receive pain medication while in the ED.</p> <p>(F) The patient was discharged at 12:33 a.m. and his/her pain was still listed as a 9 on pain scale of 1-10.</p> <p>2. After review of the medical record, staff member #1 verified at 1:05 p.m. on 2/6/14 that M.D. #1 did not address patient #3's heel pain.</p> <p>3. Facility policy titled "Pain Management: Adult and Pediatric" last reviewed/revised 11/13 states under definitions: "Pain is whatever the experiencing person says it is, and exists whenever he/she says it does." Page 3 states under assessment/reassessment: "Pain intensity, description, and pain relief as reported by the patient will be assessed, treated as appropriate, reassessed, and documented." Page 3 states under STANDARD II:..... "D. Stress to patients and their families that their communication of unrelieved pain is essential to their well-being and care and that health professionals will respond quickly to their reports of pain."</p> <p>4. Facility policy titled "Patients Rights and Responsibilities" last reviewed/revised 6/10 states under rights on page 2: "7. Appropriate assessment and management of pain."</p>	S1504		